

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation Frank Leonard VanderSloot		3. FEC Identification Number <div><div>C</div><div>C90015876</div></div>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 4609 West 65th South		
(c) City, State and ZIP Code Idaho Falls ID 83402		
2. Occupation and Name of Employer (for Individual Filers Only) CEO Melaleuca, Inc.		

4. TYPE OF REPORT (check appropriate boxes):

(a) ☒ April 15 Quarterly Report

☐ July 15 Quarterly Report ☐ 24-Hour Report

☐ October 15 Quarterly Report ☐ 48-Hour Report

☐ January 31 Year-End Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on / /

5. COVERING PERIOD:

FROM / /

THROUGH / /

6. TOTAL CONTRIBUTIONS.....

7. TOTAL INDEPENDENT EXPENDITURES

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE _____

[Electronically Filed]

Frank Leonard VanderSloot

Frank Leonard VanderSloot

05/10/2016

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 2 OF 2
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Frank Leonard VanderSloot

Full Name (Last, First, Middle Initial) of Payee

Riverbend Communications. LLC

Date of Public Distribution/Dissemination

MM / DD / YYYY
03 / 03 / 2016

Mailing Address 400 W Sunnyside

Amount

19584.00

City State Zip Code
Idaho Falls ID 83402

Transaction ID : F57.000001

Purpose of Expenditure
Radio AdCategory/
Type 004Office Sought: ☐ House State: ID
☐ Senate District: _____
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Marco RubioCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 19584.00Disbursement For: ☒ Primary ☐ General
☐ Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 19584.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶ 19584.00
(carry total from last page forward to Line 7)